



RESPONSE UNDER 37 C.F.R. § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP 1763

03500.016046

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
TOMOYUKI HIROKI ET AL.) : Examiner: R. Culbert
Application No.: 10/023,665) : Group Art Unit: 1763
Filed: December 21, 2001) :
For: METHOD FOR MANUFACTURING)
LIQUID EJECTING HEAD) :
(As Amended)) : June 2, 2004

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AFTER FINAL REJECTION

Sir:

INTRODUCTORY COMMENTS

The Examiner will note that this first reply to the final Office Action dated April 2, 2004 is being filed within two months of the mailing date of the Office Action. In response to the Office Action, please amend the above-identified application as follows:



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1763 AF

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EXPEDITED PROCEDURE
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In re Application of:

TOMOYUKI HIROKI ET AL.

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Sir:

Transmitted herewith is an Amendment After Final Rejection in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below.

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	6	MINUS	20	0	x \$9 \$18	\$ 0.00
INDEP. CLAIMS	2	MINUS	4	0	x \$43 \$86	\$ 0.00
Fee for Multiple Dependent claims \$145°/\$290						\$ 0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$ 0.00

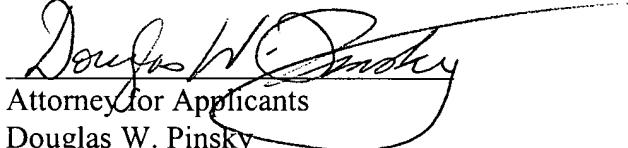
- Verified Statement claiming small entity status is enclosed, if not filed previously.
- A check in the amount of \$____ is enclosed.
- Charge \$____ to Deposit Account No. 06-1205. A duplicate of this sheet is enclosed.

Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. §§1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate of this paper is enclosed.

- A check in the amount of \$____ to cover the Extension fee for response within ____-month is enclosed.
- A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.

Applicants' undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should be directed to our below-listed address.

Respectfully submitted,



Attorney for Applicants
Douglas W. Pinsky
Registration No. 46,994

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